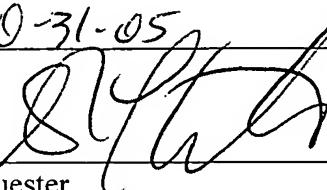




CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on 10-31-05


Jeffrey R. Kuester

In Re Application of:

Delgado, et al. Confirmation No.: 3282
Serial No.: 10/021,422 Group Art Unit: 3621
Filed: December 19, 2001 Examiner: Abdi, Kambiz
Docket No.: 190252-1211

For: **System and Method for Managing Sponsorships**

The following is a list of documents enclosed:

- Return Postcard
- Amendment Transmittal Page
- Petition for Extension of Time - 2 months
- Fee Transmittal
- Credit Card Authorization - Authorizing \$450.00
- Response

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

Customer No.: **38823**

TFW

3621

AMENDMENT TRANSMITTAL LETTER (LARGE)

Docket No.

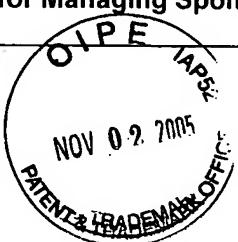
Applicant(s): Delgado, et al.

190252-1211

Serial No.
10/021,422Filing Date
December 19, 2001Examiner
Abdi, KambizConfirmation No.
3282Group Art Unit
3621

Invention: System and Method for Managing Sponsorships

Commissioner for Patents
 Mail Stop Amendment
 P.O. Box 1450
 Alexandria VA 22313-1450



Transmitted herewith is a Response and Petition for Extension of Time (2 months) in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	34 -	52 =	0	X \$50.00	\$0
INDEP. CLAIMS	2 -	4 =	0	X \$200.00	\$0
Multiple Dependent Claims (check if applicable)	<input type="checkbox"/>			\$360.00	\$0
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> \$120.00	2 ND MONTH <input checked="" type="checkbox"/> \$450.00	3 RD MONTH <input type="checkbox"/> \$1,020.00	4 TH MONTH <input type="checkbox"/> \$1,590.00	\$450
Other Fees:					\$0
				TOTAL ADDITIONAL FEE FOR THIS AMENDMENT	\$450.00

- No additional fee is required.
 Please charge Deposit Account No. _____ in the amount of _____.
 A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.
 A Credit Card Payment Form PTO-2038 is attached in the amount of \$450.00 (for 2 mo. EOT).
 The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.

Jeffrey R. Kuester, Reg. No. 34,367

10-31-05

Date